

Fill in this information to identify your case and this filing:

Debtor 1 Courtney Michelle Ieva  
 First Name Middle Name Last Name

Debtor 2 James Kenneth Ieva  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Texas

Case number 17-30079

U.S. Bankruptcy Court  
 Southern District of Texas  
 FILED

JAN 17 2017

David J. Bradley, Clerk of Court

☐ Check if this is an amended filing

## Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1. 20842 Kings Clover Ct  
 Street address, if available, or other description

Humble TX 77346  
 City State ZIP Code

Harris  
 County

**What is the property?** Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 219,474.00

Current value of the portion you own? \$ \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

homestead

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

If you own or have more than one, list here:

1.2. 3926 Hidden Glen Dr  
 Street address, if available, or other description

Kingwood TX 77339  
 City State ZIP Code

Harris  
 County

**What is the property?** Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 152,481.00

Current value of the portion you own? \$ \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

fee simple

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

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Courtney Michelle Ieva

First Name Middle Name Last Name

Case number (if known)

1.3.

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. ....

\$ 371,955.00

**Part 2: Describe Your Vehicles**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

## 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

3.1. Make: Buick  
 Model: LaCrosse  
 Year: 2007  
 Approximate mileage: 60000  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 3,000.00 \$ \_\_\_\_\_

If you own or have more than one, describe here:

3.2. Make: Harley-Davi  
 Model: Softtail  
 Year: 2007  
 Approximate mileage: \_\_\_\_\_  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 5,000.00 \$ \_\_\_\_\_

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3.3. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Approximate mileage: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ \_\_\_\_\_ Current value of the portion you own? \$ \_\_\_\_\_

3.4. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Approximate mileage: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ \_\_\_\_\_ Current value of the portion you own? \$ \_\_\_\_\_

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☐ No  
☐ Yes

4.1. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ \_\_\_\_\_ Current value of the portion you own? \$ \_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ \_\_\_\_\_ Current value of the portion you own? \$ \_\_\_\_\_

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here



\$ 8,000.00

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**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No☒ Yes. Describe..... desk-100, couch set-200, washer/dryer-100, beds-100, pool table-200, piano-200, fridge-50, table/chairs-50, trampoline-50, linens-20, misc \$ 1,270.00**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No☒ Yes. Describe..... (4) televisions-200, computers-200, cameras-100, printers-50, ds-50, tablets-100 \$ 700.00**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No☐ Yes. Describe..... \$**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No☐ Yes. Describe..... \$**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No☐ Yes. Describe..... \$**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No☒ Yes. Describe..... everyday clothes \$ 50.00**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No☒ Yes. Describe..... costume-20, wedding/engagement-300 \$ 320.00**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

☐ No☒ Yes. Describe..... 3 dogs \$ 10.00**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information..... \$**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**

\$ 2,350.00

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Middle Name

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**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the  
portion you own?Do not deduct secured claims  
or exemptions.**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No☐ Yes ..... Cash: ..... \$ .....**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes .....

Institution name:

17.1. Checking account:	<u>Bank of America</u>	\$ <u>45.00</u>
17.2. Checking account:	_____	\$ _____
17.3. Savings account:	_____	\$ _____
17.4. Savings account:	_____	\$ _____
17.5. Certificates of deposit:	_____	\$ _____
17.6. Other financial account:	_____	\$ _____
17.7. Other financial account:	_____	\$ _____
17.8. Other financial account:	_____	\$ _____
17.9. Other financial account:	_____	\$ _____

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes .....

Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☒ No☐ Yes. Give specific  
information about  
them.....

Name of entity:

% of ownership:

_____	0% _____ %	\$ _____
_____	0% _____ %	\$ _____
_____	0% _____ %	\$ _____

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**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them.....

Issuer name:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

401(k) or similar plan:

Pension plan:

IRA:

Retirement account:

Keogh:

Additional account:

Additional account:

\$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes .....

Institution name or individual:

Electric:

Gas:

Heating oil:

Security deposit on rental unit:

Prepaid rent:

Telephone:

Water:

Rented furniture:

Other:

\$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes .....

Issuer name and description:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

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**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	\$ _____
_____	\$ _____
_____	\$ _____

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific

information about them....

\$ \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No☐ Yes. Give specific

information about them....

\$ \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ No☒ Yes. Give specific

information about them....

100% ownership in ~~VPM LLC~~  
Community Vacation Property LLC

\$ 0.00

**Money or property owed to you?****Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information  
about them, including whether  
you already filed the returns  
and the tax years. ....

Federal:

\$ \_\_\_\_\_

State:

\$ \_\_\_\_\_

Local:

\$ \_\_\_\_\_

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No☐ Yes. Give specific information.....

Alimony:

\$ \_\_\_\_\_

Maintenance:

\$ \_\_\_\_\_

Support:

\$ \_\_\_\_\_

Divorce settlement:

\$ \_\_\_\_\_

Property settlement:

\$ \_\_\_\_\_

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No☐ Yes. Give specific information.....

\$ \_\_\_\_\_

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**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No☐ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.....

\$ \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No☐ Yes. Describe each claim. ....

\$ \_\_\_\_\_

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim. ....

\$ \_\_\_\_\_

**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information.....

\$ \_\_\_\_\_

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here**

\$ 45.00

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**☐ No. Go to Part 6.☒ Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe.....

\$ \_\_\_\_\_

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No☒ Yes. Describe.....

computers-200, desks-100, pool table-100

\$ 400.00



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Middle Name

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**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe.....

\$ \_\_\_\_\_

**41. Inventory**☒ No☐ Yes. Describe.....

\$ \_\_\_\_\_

**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe.....

Name of entity:

% of ownership:

\_\_\_\_\_

\_\_\_\_\_%

\$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_%

\$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_%

\$ \_\_\_\_\_

**43. Customer lists, mailing lists, or other compilations**☒ No☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe.....

\_\_\_\_\_

\$ \_\_\_\_\_

**44. Any business-related property you did not already list**☒ No☐ Yes. Give specific information .....\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** .....

\$ 400.00

**Part 6:****Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**☐ No. Go to Part 7.☐ Yes. Go to line 47.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

☐ No☐ Yes.....

\_\_\_\_\_

\$ \_\_\_\_\_

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## 48. Crops—either growing or harvested

☐ No☐ Yes. Give specific information.....

\$ \_\_\_\_\_

## 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☐ No☐ Yes.....

\$ \_\_\_\_\_

## 50. Farm and fishing supplies, chemicals, and feed

☐ No☐ Yes.....

\$ \_\_\_\_\_

## 51. Any farm- and commercial fishing-related property you did not already list

☐ No☐ Yes. Give specific information.....

\$ \_\_\_\_\_

## 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$ \_\_\_\_\_

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

## 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No☐ Yes. Give specific information.....

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

## 54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$ \_\_\_\_\_

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 → \$ 371,955.00

56. Part 2: Total vehicles, line 5 \$ 8,000.00

57. Part 3: Total personal and household items, line 15 \$ 2,350.00

58. Part 4: Total financial assets, line 36 \$ 45.00

59. Part 5: Total business-related property, line 45 \$ 400.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61. \$ 10,795.00 Copy personal property total → + \$ 10,795.00

63. Total of all property on Schedule A/B. Add line 55 + line 62. \$ 382,650.00

## Fill in this information to identify your case:

Debtor 1	Courtney Michelle Ieva		
	First Name	Middle Name	Last Name
Debtor 2	James Kenneth Ieva		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the Southern District of Texas			
Case number (if known)	17-30079		

☐ Check if this is an amended filing

## Official Form 106C

**Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
Brief description: <u>20842 Kings Clover C</u>	<u>\$219,474.00</u>	<input checked="" type="checkbox"/> \$ <u>79,474.00</u>	11 U.S.C. section 522(d)(1)
Line from <i>Schedule A/B</i> : <u>1.1</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>3926 Hidden Glen Dr</u>	<u>\$152,481.00</u>	<input checked="" type="checkbox"/> \$ <u>35,045.35</u>	11 U.S.C. section 522(d)(5)
Line from <i>Schedule A/B</i> : <u>1.2</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____	
Line from <i>Schedule A/B</i> : _____		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes

Debtor 1

Courtney Michelle Ieva

First Name Middle Name Last Name

Case number (if known)

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**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: <u>Personal Checking Ac</u> Line from Schedule A/B: <u>17.1</u>	\$ <u>45.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. section 522(d)(5)
Brief description: <u>2007 Buick</u> Line from Schedule A/B: <u>3.1</u>	\$ <u>3,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. section 522(d)(2)
Brief description: <u>2007 Harley Davidso</u> Line from Schedule A/B: <u>3.2</u>	\$ <u>5,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. section 522(d)(2)
Brief description: <u>household items</u> Line from Schedule A/B: <u>6</u>	\$ <u>1,270.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. 522(d)(3)
Brief description: <u>Electronics</u> Line from Schedule A/B: <u>7</u>	\$ <u>700.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. 522(d)(3)
Brief description: <u>everyday clothing</u> Line from Schedule A/B: <u>11</u>	\$ <u>50.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. 522(d)(3)
Brief description: <u>Jewelry</u> Line from Schedule A/B: <u>12</u>	\$ <u>320.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. 522(d)(4)
Brief description: <u>dogs</u> Line from Schedule A/B: <u>13</u>	\$ <u>10.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. 522(d)(5)
Brief description: <u>Community Vacation Property</u> <del>VPM Magic LLC</del> Line from Schedule A/B: <u>27</u>	\$ <u>0.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. 522(d)(5)
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

## Fill in this information to identify your case:

Debtor 1	Courtney Michelle Ieva		
	First Name	Middle Name	Last Name
Debtor 2	James Kenneth Ieva		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern District of Texas			
Case number (if known)	17-30079		

☐ Check if this is an amended filing

## Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

2.1	Nationstar Mortgage	Describe the property that secures the claim:	\$ 106,255.84	\$ 152,481.00	\$
Creditor's Name PO Box 199111		conventional real estate loan, fee simple, ongoing			
Number Street Dallas TX 75219		As of the date you file, the claim is: Check all that apply.			
City State ZIP Code		<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
Who owes the debt? Check one.		Nature of lien. Check all that apply.			
<input checked="" type="checkbox"/> Debtor 1 only		<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Judgment lien from a lawsuit			
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Other (including a right to offset)			
<input checked="" type="checkbox"/> Check if this claim relates to a community debt					
Date debt was incurred 07/19/2005		Last 4 digits of account number			
2.2	Nationstar Mortgage	Describe the property that secures the claim:	\$ 11,180.40	\$ 152,481.00	\$
Creditor's Name PO Box 199111		conventional real estate, fee simple, arrears			
Number Street Dallas TX 75219		As of the date you file, the claim is: Check all that apply.			
City State ZIP Code		<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
Who owes the debt? Check one.		Nature of lien. Check all that apply.			
<input checked="" type="checkbox"/> Debtor 1 only		<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Judgment lien from a lawsuit			
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Other (including a right to offset)			
<input checked="" type="checkbox"/> Check if this claim relates to a community debt					
Date debt was incurred 07/19/2005		Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 117,436.24

Debtor 1

Courtney Michelle Ieva

First Name Middle Name Last Name

Case number (if known) 17-30079

**Part 1:****Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim  
Do not deduct the  
value of collateral.

Column B

Value of collateral  
that supports this  
claimColumn C  
Unsecured  
portion  
If any**2.3** Ocwen Loan Servicing

Creditor's Name

12650 Ingenuity Dr

Number Street

Describe the property that secures the claim:

Conventional Real estate, homestead,  
ongoing

\$ 145,918.86

\$ 219,474.00

Orlando

FL

32826

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured  
car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim relates to a  
community debt

Date debt was incurred 07/07/2006

Last 4 digits of account number 4 1 5 1

**2.4** Ocwen Loan Servicing

Creditor's Name

12650 Ingenuity Dr

Number Street

Describe the property that secures the claim:

Conventional real estate, homestead, arrear

\$ 11,863.18

\$ 219,474.00

Orlando

FL

32826

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured  
car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim relates to a  
community debt

Date debt was incurred 07/07/2006

Last 4 digits of account number 4 1 5 1

**2.4**

Creditor's Name

Number Street

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured  
car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a  
community debt

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 157,782.04

If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here:

\$ 275,218.28

Fill in this information to identify your case:

Debtor 1 Courtney Michelle Ieva  
First Name Middle Name Last Name

Debtor 2 James Kenneth Ieva  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Texas ☒

Case number 17-30079  
(if known)

☐ Check if this is an amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.  
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1			

2.1

Priority Creditor's Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

## Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

## Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

## Is the claim subject to offset?

- ☐ No  
☐ Yes

2.2

Priority Creditor's Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

## Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

## Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

## Is the claim subject to offset?

- ☐ No  
☐ Yes



Debtor 1

First Name

Middle Name

Last Name

Case number (if known)

17

30079

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim

Priority  
amountNonpriority  
amount☐

Priority Creditor's Name

Last 4 digits of account number

\$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify

Is the claim subject to offset?

- ☐ No  
☐ Yes

☐

Priority Creditor's Name

Last 4 digits of account number

\$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify

Is the claim subject to offset?

- ☐ No  
☐ Yes

☐

Priority Creditor's Name

Last 4 digits of account number

\$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify

Is the claim subject to offset?

- ☐ No  
☐ Yes



Debtor 1

Courtney Michelle Teva  
 First Name Middle Name Last Name

Case number (if known)

17-30079

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1

Navient

Nonpriority Creditor's Name

PO Box 9500

Number Street

Wilkes Barre

PA

18773

City

State

ZIP Code

Last 4 digits of account number 2 0 0 0When was the debt incurred? 10/01/2000

Total claim

\$ 7,338.00

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.2

Navient

Nonpriority Creditor's Name

PO Box 9500

Number Street

Wilkes Barre

PA

18773

City

State

ZIP Code

Last 4 digits of account number 1 9 9 7When was the debt incurred? 09/01/1997\$ 3,767.00

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.3

Navient

Nonpriority Creditor's Name

PO Box 9500

Number Street

Wilkes Barre

PA

18773

City

State

ZIP Code

Last 4 digits of account number 1 9 9 8When was the debt incurred? 09/01/1998\$ 4,680.00

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

Debtor 1

Courtney Michelle Ieva  
 First Name Middle Name Last Name

Case number (if known)

17-30079

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

**Navient**

Nonpriority Creditor's Name

PO Box 9500

Number Street

Wilkes Barre

PA

18773

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 1 9 9 9

\$ 7,354.00

When was the debt incurred? 09/01/1999

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.5

**ACS/Wells Fargo**

Nonpriority Creditor's Name

501 Bleecker St

Number Street

Utica

NY

13501

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 0 4 2 4

\$ 99,000.00

When was the debt incurred? 09/01/2003

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.6

**ACS/Wells Fargo**

Nonpriority Creditor's Name

501 Bleecker St

Number Street

Utica

NY

13501

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 0 4 2 4

\$ 41,676.00

When was the debt incurred? 09/01/2003

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

Debtor 1

Courtney Michelle Ieva

First Name Middle Name Last Name

Case number (if known)

17-30079

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7

**Centerpoint Energy**

Nonpriority Creditor's Name

PO Boc 1700

Number Street

Houston

TX

77251

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 9 8 8 0\$ 122.00When was the debt incurred? 11/01/2005

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify utility

4.8

**Texas Guarantee Student Loans**

Nonpriority Creditor's Name

PO Box 83100

Number Street

Round Rock

TX

78683

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 9 3 1 2\$ 35,449.00When was the debt incurred? 02/01/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.9

**Texas Guarantee Student Loans**

Nonpriority Creditor's Name

PO Box 83100

Number Street

Round Rock

TX

78683

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 9 3 1 2\$ 2,843.00When was the debt incurred? 02/01/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

Debtor 1

Courtney Michelle Ieva

First Name

Middle Name

Last Name

Case number (if known)

17-30079

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10

Chase

Nonpriority Creditor's Name

PO Box 15298

Number Street

Wilmington

DE

19850

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 1 8 2 0

\$ 807.00

When was the debt incurred? 05/01/2007

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify credit card

4.11

Alexander Rose Associates

Nonpriority Creditor's Name

8876 Gulf Freeway Suite 400

Number Street

Houston

TX

77017

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0 1 5 9

\$ 3,465.00

When was the debt incurred? 12/01/2015

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Collection agency

4.12

Amerassist

Nonpriority Creditor's Name

445 Hutchinson Ave STE 5

Number Street

Columbus

OH

43235

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 5 7 X X

\$ 270.00

When was the debt incurred? 02/01/2015

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify collections

Debtor 1

Courtney Michelle Ieva

First Name

Middle Name

Last Name

Case number (if known)

17-30079

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.1:

**Mercantile**

Nonpriority Creditor's Name

165 Lawrence Bell Dr

Number Street

Buffalo

NY

14221

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 6 3 4 1\$ 1,150.00When was the debt incurred? 07/01/2016

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify collections

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

Debtor 1

Courtney Michelle Ieva

First Name

Middle Name

Last Name

Case number (if known)

17-30079

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number \_\_\_\_

Debtor 1

Courtney Michelle Ieva

First Name

Middle Name

Last Name

Case number (if known)

17-30079

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

**Total claim****Total claims  
from Part 1**

6a. Domestic support obligations

6a. \$ \_\_\_\_\_

6b. Taxes and certain other debts you owe the government

6b. \$ \_\_\_\_\_

6c. Claims for death or personal injury while you were intoxicated

6c. \$ \_\_\_\_\_

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. + \$ \_\_\_\_\_

6e. Total. Add lines 6a through 6d.

6e. \$ \_\_\_\_\_

**Total claim****Total claims  
from Part 2**

6f. Student loans

6f. \$ 202,098.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ \_\_\_\_\_

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ \_\_\_\_\_

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. + \$ 5,814.00

6j. Total. Add lines 6f through 6i.

6j. \$ 207,912.00

Fill in this information to identify your case:

Debtor	Courtney Michelle Ieva		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse If Filing)	James Kenneth Ieva		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern District of Texas			
Case number (If known)	17-30079		

☐ Check if this is an amended filing

## Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

## 1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1

Name \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

2.2

Name \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

2.3

Name \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

2.4

Name \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

2.5

Name \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_



Fill in this information to identify your case:

Debtor 1 Courtney Michelle Ieva  
First Name Middle Name Last Name

Debtor 2 James Kenneth Ieva  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Texas ☐

Case number 17-30079  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status****Debtor 1**

- ☒ Employed  
☐ Not employed

**Occupation**Teacher**Employer's name**Humble ISD**Employer's address**20200 Eastway Village Dr  
Number Street

Humble TX 77338  
City State ZIP Code

How long employed there? 4 months**Debtor 2 or non-filing spouse**

- ☐ Employed  
☒ Not employed

                      
Number Street

                                                                
City State ZIP Code

4 months**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ <u>4,950.00</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	+\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	\$ <u>4,950.00</u>	\$ <u>0.00</u>

Debtor 1 Courtney Michelle Ieva  
 First Name Middle Name Last Name

Case number (if known) 17-30079

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>
Copy line 4 here..... → 4.	\$ 4,950.00	\$ 0.00
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 66.20	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 399.42	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 410.96	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: <u>advance pay</u>	5h. +\$ 320.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 1,196.58	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 3,753.42	\$ 0.00
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 3,000.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h. +\$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0.00	\$ 3,000.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,753.42	\$ 3,000.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + \$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12. \$ 6,753.42	
<b>Combined monthly income</b>		
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Debtor 1 Courtney Michelle Ieva

Case Number 17-30079

8a. Attached Statement (Debtor 2)

Community Vacation Property, LLC

Gross Monthly Income:	3000.00
-----------------------	---------

Expenses

Net Monthly Income	3000.00
--------------------	---------

**Humble Independent School District**

P.O. Box 2000  
 Humble, TX 77347-2000  
 (281) 641-8026 Fax (281) 641-1061

Advice Date 10/31/2016 Advice Number 944801

Deposit \*\*\*\*\* NO Dollars and 00 Cents \*\*\*\*\*

\$ .00

0044

To The  
 Account Of

COURTNEY IEVA  
 20842 KINGS CLOVER CT  
 HUMBLE, TX 77346

**DIRECT DEPOSIT  
 NON-NEGOTIABLE**

Humble Independent School District

Emp No	Employee Name		Period Ending		Advice Date	Type	Advice No
8384	COURTNEY IEVA		10/08/2016		10/31/2016	SEMI-MONTH	944801
Type	Rate	Hours	Earnings	YTD Earnings	Deductions	Current	Year-To-Date
REG SALARY	0.0000	-1.00	2084.73	8952.79	MEDICARE T	33.10	146.90
SAL SICK	0.0000	0.50	153.47	153.47	HEALTH INS	137.00	548.00
PROF DEV	0.0000	0.50	153.47	153.47	DENTAL INS	19.83	79.32
MA/SC RET	10.6952	0.00	83.33	333.32	VISION INS	10.25	41.00
SAL PB				306.95	LIFE EE AD	11.00	44.00
ADVANCEPAY				1600.00	LIFE SP AD	1.80	7.20
REOMATH/SC				1000.00	VOL LIFE C	0.60	2.40
					ADVANCEPAY	160.00	640.00

**Humble Independent School District**

P.O. Box 2000  
 Humble, TX 77347-2000  
 (281) 641-8026 Fax (281) 641-1061

Advice Date 11/15/2016  
 Advice Number 950844

Deposit \*\*\*\*\* NO Dollars and 00 Cents \*\*\*\*\*

\$ .00

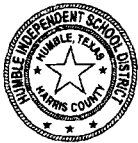
0044

To The Account Of  
 COURTNEY IEVA  
 20842 KINGS CLOVER CT  
 HUMBLE, TX 77346

**DIRECT DEPOSIT  
 NON-NEGOTIABLE**

Humble Independent School District

Emp No	Employee Name		Period Ending	Advice Date	Type	Advice No	
8384	COURTNEY IEVA		10/22/2016	11/15/2016	SEMI-MONTH	950844	
Type	Rate	Hours	Earnings	YTD Earnings	Deductions	Current	Year-To-Date
REG SALARY	0.0000	-1.00	2084.72	11037.51	MEDICARE T	33.10	180.00
SAL PB	0.0000	1.00	306.95	613.90	HEALTH INS	137.00	685.00
MA/SC RET	10.6952	0.00	83.33	416.65	DENTAL INS	19.83	99.15
SAL SICK				153.47	VISION INS	10.25	51.25
PROF DEV				153.47	LIFE EE AD	11.00	55.00
ADVANCEPAY				1600.00	LIFE SP AD	1.80	9.00
RECMATH/SC				1000.00	VOL LIFE C	0.60	3.00
					FOUNDATION	5.00	5.00

**Humble Independent School District**

P.O. Box 2000  
Humble, TX 77347-2000  
(281) 641-8026 Fax (281) 641-1061

Advice Date 11/30/2016 Advice Number 956910

Deposit \*\*\*\*\* NO Dollars and 00 Cents \*\*\*\*\*

\$ .00

0044

To The  
Account Of

COURTNEY IEVA  
20842 KINGS CLOVER CT  
HUMBLE, TX 77346

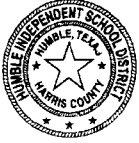
**DIRECT DEPOSIT  
NON-NEGOTIABLE**

Humble Independent School District

Emp No	Employee Name	Period Ending	Advice Date	Type	Advice No		
8384	COURTNEY IEVA	11/12/2016	11/30/2016	SEMI-MONTH	956910		
Type	Rate	Hours	Earnings	YTD Earnings	Deductions	Current	Year-To-Date
REG SALARY	0.0000	0.00	2391.67	13429.18	MEDICARE T	33.10	213.10
MA/SC RET	10.6952	0.00	83.33	499.98	HEALTH INS	137.00	822.00
SAL SICK				153.47	DENTAL INS	19.83	118.98
SAL PB				613.90	VISION INS	10.25	61.50
PROF DEV				153.47	LIFE EE AD	11.00	66.00
ADVANCEPAY				1600.00	LIFE SP AD	1.80	10.80
RECMATH/SC				1000.00	VOL LIFE C	0.60	3.60
					FOUNDATION	5.00	10.00
					ADVANCEPAY	160.00	960.00
					TRS-MEM CO	184.16	1093.00
					TRS-CARE	15.55	93.30
					FSA-MEDICA	25.00	150.00
					DIR DEP NE	1871.71	
					BANK OF AMERICA		
TOTALS			2475.00	17450.00	TOTALS	2475.00	3602.28
YTD Earnings	YTD Taxable Earnings	Current Taxable Gross	Current Total Pay	Current Deductions	Current Net Pay		
17,450.00	13,604.52	2,098.76	2,475.00	603.29			

Description	Beginning Balance	ACCRUALS Earned	Used	Ending Balance
SICK-SALRD				4.500
PERS-SALRD				3.000

Withholding Allowances			
	M/S	#	Extra
Federal	M	12	\$ .00
State	M	12	\$ .00

**Humble Independent School District**

P.O. Box 2000  
 Humble, TX 77347-2000  
 (281) 641-8026 Fax (281) 641-1061

Advice Date 12/15/2016  
 Advice Number 963049

Deposit \*\*\*\*\* NO Dollars and 00 Cents \*\*\*\*\*

\$ .00

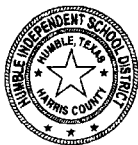
0044

To The  
 Account Of  
 COURTNEY IEVA  
 20842 KINGS CLOVER CT  
 HUMBLE, TX 77346

**DIRECT DEPOSIT  
 NON-NEGOTIABLE**

Humble Independent School District

Emp No	Employee Name		Period Ending		Advice Date	Type	Advice No
8384	COURTNEY IEVA		11/26/2016		12/15/2016	SEMI-MONTH	963049
Type	Rate	Hours	Earnings	YTD Earnings	Deductions	Current	Year-To-Date
REG SALARY	0.0000	-0.50	2238.20	15667.38	MEDICARE T	33.10	246.20
PROF DEV	0.0000	0.50	153.47	306.94	HEALTH INS	137.00	959.00
MA/SC RET	10.6952	0.00	83.33	583.31	DENTAL INS	19.83	138.81
SAL SICK				153.47	VISION INS	10.25	71.75
SAL PB				613.90	LIFE EE AD	11.00	77.00
ADVANCEPAY				1600.00	LIFE SP AD	1.80	12.60
RECMATH/SC				1000.00	VOL LIFE C	0.60	4.20
					FOUNDATION	5.00	15.00

**Humble Independent School District**

P.O. Box 2000  
 Humble, TX 77347-2000  
 (281) 641-8026 Fax (281) 641-1061

Advice Date 12/30/2016  
 Advice Number 969044

Deposit \*\*\*\*\* NO Dollars and 00 Cents \*\*\*\*\*

\$ .00

0044  
 To The COURTNEY IEVA  
 Account Of 20842 KINGS CLOVER CT  
 HUMBLE, TX 77346

**DIRECT DEPOSIT  
 NON-NEGOTIABLE**

Humble Independent School District


Emp No	Employee Name		Period Ending		Advice Date	Type	Advice No
8384	COURTNEY IEVA		12/10/2016		12/30/2016	SEMI-MONTH	969044
Type	Rate	Hours	Earnings	YTD Earnings	Deductions	Current	Year-To-Date
REG SALARY	0.0000	0.00	2391.67	18059.05	MEDICARE T	33.10	279.30
MA/SC RET	10.6952	0.00	83.33	666.64	HEALTH INS	137.00	1096.00
SAL SICK				153.47	DENTAL INS	19.83	158.64
SAL PB				613.90	VISION INS	10.25	82.00
PROF DEV				306.94	LIFE EE AD	11.00	88.00
ADVANCEPAY				1600.00	LIFE SP AD	1.80	14.40
RECMATH/SC				1000.00	VOL LIFE C	0.60	4.80
					FOUNDATION	5.00	20.00



## Fill in this information to identify your case:

Debtor 1 Courtney Michelle Ieva  
First Name Middle Name Last Name

Debtor 2 James Kenneth Ieva  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Texas 

Case number 17-30079  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Your Household

## 1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

## 2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

son

14

☐ No  
☒ Yes

son

11

☐ No  
☒ Yes

son

4

☐ No  
☒ Yes

☐ No  
☐ Yes

☐ No  
☐ Yes

## 3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No  
☐ Yes

## Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

## 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ \_\_\_\_\_

If not included in line 4:

4a. Real estate taxes

4a. \$ \_\_\_\_\_

4b. Property, homeowner's, or renter's insurance

4b. \$ \_\_\_\_\_

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 150.00

4d. Homeowner's association or condominium dues

4d. \$ 40.00

Debtor 1

Courtney Michelle Ieva  
 First Name Middle Name Last Name

Case number (if known) 17-30079**Your expenses**

- |   |      |    |          |
|---|------|----|----------|
| 5. Additional mortgage payments for your residence, such as home equity loans   | 5.   | \$ |          |
| 6. Utilities:   |      |    |          |
| 6a. Electricity, heat, natural gas  | 6a.  | \$ | 300.00   |
| 6b. Water, sewer, garbage collection  | 6b.  | \$ | 40.00    |
| 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.  | \$ | 385.00   |
| 6d. Other. Specify: _____   | 6d.  | \$ |          |
| 7. Food and housekeeping supplies   | 7.   | \$ | 1,200.00 |
| 8. Childcare and children's education costs   | 8.   | \$ | 860.00   |
| 9. Clothing, laundry, and dry cleaning  | 9.   | \$ | 30.00    |
| 10. Personal care products and services   | 10.  | \$ | 25.00    |
| 11. Medical and dental expenses   | 11.  | \$ | 100.00   |
| 12. Transportation. Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12.  | \$ | 200.00   |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.  | \$ | 300.00   |
| 14. Charitable contributions and religious donations  | 14.  | \$ | 0.00     |
| 15. Insurance.<br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |      |    |          |
| 15a. Life insurance   | 15a. | \$ |          |
| 15b. Health insurance   | 15b. | \$ | 250.00   |
| 15c. Vehicle insurance  | 15c. | \$ | 200.00   |
| 15d. Other insurance. Specify: _____  | 15d. | \$ |          |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: _____  | 16.  | \$ |          |
| 17. Installment or lease payments:  |      |    |          |
| 17a. Car payments for Vehicle 1   | 17a. | \$ |          |
| 17b. Car payments for Vehicle 2   | 17b. | \$ |          |
| 17c. Other. Specify: _____  | 17c. | \$ |          |
| 17d. Other. Specify: _____  | 17d. | \$ |          |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.  | \$ |          |
| 19. Other payments you make to support others who do not live with you.<br>Specify: _____   | 19.  | \$ |          |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   |      |    |          |
| 20a. Mortgages on other property  | 20a. | \$ |          |
| 20b. Real estate taxes  | 20b. | \$ |          |
| 20c. Property, homeowner's, or renter's insurance   | 20c. | \$ |          |
| 20d. Maintenance, repair, and upkeep expenses   | 20d. | \$ | 100.00   |
| 20e. Homeowner's association or condominium dues  | 20e. | \$ | 40.00    |

Debtor 1

Courtney Michelle Ieva

First Name Middle Name Last Name

Case number (if known) 17-30079

21. Other. Specify: \_\_\_\_\_

21. +\$ \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ 4,220.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ \_\_\_\_\_

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 4,220.00

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 6,753.42

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 4,220.00

23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23c. \$ 2,533.42

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.☐ Yes. Explain here: \_\_\_\_\_